

**DECLARATION AND POWER
OF ATTORNEY FOR UTILITY
OR DESIGN
PATENT APPLICATION**

Declaration Declaration
 Submitted with Submitted after Initial
 Initial Filing Filing (surcharge
 37 CFR 1.16(e) required)

Attorney Docket No.	BSC-162 (1002/217)
First Named Inventor	Barron
COMPLETE IF KNOWN	
Application Serial Number	Not yet assigned
Filing Date	Herewith
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BONE ANCHOR PROTECTIVE COVER

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on
(MM/DD/YYYY)

as United States Application Serial Number or PCT International

Application Number and was amended on (MM/DD/YYYY) *(if applicable)*.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.

Declaration and Power of Attorney for Utility or Design Patent Application

Serial No. Not yet assigned

Atty. Docket No. BSC-162

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DECLARATION – Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number → Place Customer Number Bar Code Label Here

OR

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Michael J. Bastian	P-47,411	Kurt W. Lockwood	40,704
Steven M. Bauer	31,481	Thomas C. Meyers	36,989
Elias C. Behrakis	P-47,416	Joseph B. Milstein	42,897
John V. Bianco	36,748	David G. Miranda	42,898
Isabelle A.S. Blundell	43,321	Ronda P. Moore	44,244
Maureen A. Bresnahan	44,559	Indranil Mukerji	P-46,944
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Danielle L. Herritt	43,670	Gerald E. Worth	45,238
Douglas J. Kline	35,574	Yin P. Zhang	44,372
John D. Lanza	40,060		

Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:

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Fax No.: (617) 248-7100

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Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
John Christopher				Barron				
Inventor's Signature	<i>John Christopher Barron</i>					Date	3-9-01	
Residence	City		State		Country		Citizenship	USA
Mailing Address	231 W. Canton #4							
Mailing Address (ln. 2)	City	Boston	State	MA	ZIP	02116	Country	USA
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.								
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Ghaleb A.				Sater				
Inventor's Signature						Date		
Residence	City		State		Country		Citizenship	USA
Mailing Address	1200 Salem Street, Unit No. 123							
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